and the same of th	MISSOURI DEPARTMENT OF REVENUE
	STATEMENT OF INCOME TAX PAYMENTS FOR
	NONRESIDENT INDIVIDUAL PARTNERS OR
Thomas .	S CORPORATION SHAREHOLDERS

2003	DLN
FORM	
O-2ND	

NONRESIDENT INDIVIDUAL PARTNE S CORPORATION SHAREHOLDERS	MO-2NR				
FOR CALENDAR YEAR 2003 OR FISCAL YEAR BE	1	, 2003 AND END	ING	, 2004	
1. NAME OF PARTNERSHIP/S CORPORATION		DOR ONLY	2. MISSOURI TAX ID NUM	MBER	
ADDRESS			3. FEDERAL TAX ID NUM	IBER	
CITY OR TOWN	STATE	ZIP CODE	4. TYPE OF ENTITY Partnership S		Liability Company d as a Partnership)
5. NAME OF PARTNER/SHAREHOLDER	·		6. SOCIAL SECURITY NU	JMBER	
ADDRESS			7. INCOME SUBJECT TO	TAX	00
CITY OR TOWN	STATE	ZIP CODE	8. MISSOURI INCOME TAX PAYMENT OC		
Partner/Shareholder copy — Keep this copy	ls	Сору А			
MO 860-2855 (12-2003) This publicatio	n is available upo	on request in alternative	accessible format(s)	•	

MISSOURI DEPARTMENT OF REVEN STATEMENT OF INCOME TAX PA NONRESIDENT INDIVIDUAL PAR S CORPORATION SHAREHOLDE	2003 FORM MO-2NR	DLN			
FOR CALENDAR YEAR 2003 OR FISCAL YEAR	BEGINNING		, 2003 AND END	DING	, 2004
1. NAME OF PARTNERSHIP/S CORPORATION		DOR ONLY	2. MISSOURI TAX ID NU	MBER	
ADDRESS			3. FEDERAL TAX ID NUI	MBER	
CITY OR TOWN	STATE	ZIP CODE	4. TYPE OF ENTITY Partnership S		ility Company a Partnership)
5. NAME OF PARTNER/SHAREHOLDER		·	6. SOCIAL SECURITY N	UMBER	
ADDRESS			7. INCOME SUBJECT TO	TAX	00
CITY OR TOWN	STATE	ZIP CODE	8. MISSOURI INCOME T	AX PAYMENT	00
Partnership/S Corporation copy — Keep this copy for your records			Copy B		

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MISSOURI DEPARTMENT OF REVENUE STATEMENT OF INCOME TAX PAYMEN' NONRESIDENT INDIVIDUAL PARTNERS S CORPORATION SHAREHOLDERS		2003 FORM MO-2NR	DLN			
FOR CALENDAR YEAR 2003 OR FISCAL YEAR BEGIN	NING		, 2003 AND ENDING	, 2004		
1. NAME OF PARTNERSHIP/S CORPORATION		DOR ONLY	2. MISSOURI TAX ID NUMBER			
ADDRESS			3. FEDERAL TAX ID NUMBER			
CITY OR TOWN	STATE	ZIP CODE	4. TYPE OF ENTITY Partnership S Corporation (Treated as a Partners			
5. NAME OF PARTNER/SHAREHOLDER		·	6. SOCIAL SECURITY NUMBER			
ADDRESS			7. INCOME SUBJECT TO TAX	00		
CITY OR TOWN	STATE	ZIP CODE	8. MISSOURI INCOME TAX PAYMENT	00		
Attach to Form MO-1NR. See instructions for Li	ne 1 of Form	MO-1NR.	Copy C DOR ONLY	·		